(ii) AN Magadh Medical College, Gaya (L-II)

(iii) Civil Hospital, Kishanganj (L-III)

(iv) Distt Hospital, Purnia (L-II)

(v) Civil Hospital, Madhepura (L-III)

(vi) Darbhanga Medical College, Darbhanga (L-II)

(vii) S.K. Medical College Hospital, Muzaffarpur (L-II)

(viii) Civil Hospital, Gopalganj (L-III)

(ix) Civil Hospital, Jhanjarpur (L-III)

The proposed AIIMS like institution at Patna will have a level-1 trauma care centres.

The funds earmarked for L-I, L-II and L-III Centres are upto Rs. 16.00 crores, Rs, 9.65 crores and Rs. 4.80 crores respectively. These centres would have well equipped emergency department, intensive care unit, operation theater, blood bank, rehabilitation services alongwith broad range of comprehensive diagnostic capabilities and supportive services depending on the level of trauma care centre. Communication Network alongwith advance life supported ambulances will also be available in these centres.

Free delivery facility for women in hospitals

†2119. SHRI PYARELAL KHANDELWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that rural population of the country especially women are deprived of the benefits derived from Government Medical Schemes;

(b) whether it is also a fact that women are forced to have delivery without any medical assistance;

(c) if not, the details of Government schemes and the results achieved therefrom, State-wise;

(d) whether Government proposes to issue any guidelines to all the private nursing homes/hospitals to provide free delivery facilities for women; and

(e) if not, the details thereof and the reaction of Government towards World Health Report, 2008?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (e) The National Rural Health Mission (NRHM, 2005-2012), and under its umbrella, the Reproductive and Child Health Programme Phase II, launched by the Government of India in the year 2005, aims to improve access for rural people, especially poor women and children to equitable, affordable, accountable and effective primary health care, with a special focus on 18 States which have weak public health indicators and weak infrastructure.

As per the National Family Health Survey (NFHS) III (2005-06) survey report, published in 2007; of the total deliveries in the country 48.8% of deliveries are assisted by a health provider.

† Original notice of the question was received in Hindi.

The Government has launched the Janani Suraksha Yojana (JSY), a cash benefit scheme, under RCH II, to promote Institutional Delivery with a special focus on Below Poverty Line (BPL) and SC/ST pregnant women. The benefit of the scheme is provided for deliveries conducted at all Government health facilities including accredited private nursing homes/hospitals. The details of the scheme including the State-wise reported achievements are given in the Statement (*See* below).

The World Health Report 2008 focuses on strengthening of primary health care setup in countries. In India, such strengthening is already encompassed under NRHM/RCH II.

Statement

Janani Suraksha Yojana

Janani Suraksha Yojana (JSY) is a safe motherhood intervention under the National Rural Health Mission (NRHM) was launched on 12th April 2005 to promote institutional delivery among the poor pregnant women. The Yojana is being implemented in all States and Union Territories. JSY is a 100% centrally sponsored scheme.

(2) The scheme focuses on the poor pregnant woman with special dispensation for States having low institutional delivery rate namely, the States of Uttar Pradesh, Uttarakhand, Bihar, Jharkhand, Madhya Pradesh, Chhattisgarh, Assam, Orissa, Rajasthan and Jammu and Kashmir, While these States have been classified as Low Performing States (LPS), the remaining states have been named as High Performing States (HPS). Besides the maternal care, the scheme provides cash assistance to all eligible mothers for delivery care.

(3) The Yojana has identified ASHA, the Accredited Social Health Activist as an effective link between the Government and the poor pregnant women in 10 low performing States, namely the 8 (BAG) - Empowered Action Group (BAG) states and Assam and J&K and the remaining NE States. Her main role is to facilitate pregnant women to avail Services of maternal care and arrange referral transport.

(4) Eligibility for Cash Assistance;

In LPS States	All woman including those from SC and ST families, delivering in Government health centres like Sub-centre, PHC/CHC/FRU/general words of District and State Hospitals or accredited private institutions.
In HPS States	BPL pregnant women, aged 19 years and above upto two live births and SC and ST pregnant woman.

(5) Scale of Cash Assistance (in Rs) for Institutional Delivery;

Category	Rural Area		Urban Area	
	Mother's Package	ASHA Package	Mother's Package	ASHA Package
In LPS	1400	600	100	200
In HPS	700		600	

7. The Yojana subsidizes the cost of Caesarean Section or for the management of Obstetric complications, upto to Rs. 1500/- per delivery to the Government Institutions, where Government specialists are not in position.

8. LPS and HPS States, all such BPL pregnant women, aged 19 years and above, preferring to deliver at home are entitled to cash assistance of Rs.500/-per delivery, upto two live births.

JSY Physical Performance 2007-08

Sl.No.	State	Institutional Delivery		Total No. of
		No.	%	beneficiary
1	2	3	4	5
NE States				
1.	Arunachal Pradesh	6669	86.73	7689
2.	Assam	296120	97.17	304741
3.	Manipur	5683	65.59	8664
4.	Meghalaya	956	95.31	1003
5.	Mizoram	11733	87.75	13371
6.	Nagaland	8457	100.00	8457
7.	Sikkim	1121	69.37	1616
8.	Tripura	11448	73.63	15547
High Focus States				
9.	Bihar	838481	100.00	838481
10.	Chhattisgarh	101749	57.82	175978
11.	Himachal Pradesh	4054	39.09	10371
12.	Jammu and Kashmir	10038	94.98	10568
13.	Jharkhand	34988	13.89	251867
14.	Madhya Pradesh	1106239	99.14	1115841
15.	Orissa	411774	83.92	490657
16.	Rajasthan	759652	98.04	774877
17.	Uttar Pradesh	706073	88.54	797505
18.	Uttarakhand	42973	61.67	69679
Non-High Focus States				
19.	Andhra Pradesh	563401	100.00	563401
20.	Delhi	0	0.00	7238
21.	Goa	765	85.19	898
22.	Gujarat	107088	57.59	185956

1	2	3	4	5
23.	Haryana	16363	46.17	35441
24.	Karnataka	196918	69.58	28300
25.	Kerala	160267	98.90	162050
26.	Maharashtra	219000	58.40	375000
27.	Punjab	4423	44.60	9917
28.	Tamil Nadu	220591	96.07	229609
29.	West Bengal	337470	58.93	572651
Union Territories				
30.	A & N Island	286	80.79	354
31.	Chandigarh	1215	100.00	1215
32.	D & N Haveli	65	24.07	270
33.	Daman Diu	0	-	0
34.	Lakshadweep	198	99.00	200
35.	Puducherry	4369	99.54	4389

Credit Guarantee Fund Scheme

2120.Dr. K. MALAISAMY: Will the Minister of MICRO, SMALL AND MEDIUM ENTERPRISES be pleased to state:

(a) the extent of success or effect in developing and promoting micro, small and medium industries by implementing Credit Guarantee Fund Scheme;

(b) whether it is a fact that certain banks are still insisting collateral security when it is not needed under the scheme;

(c) whether there would be a penal action against such banks; and

(d) what is the review mechanism available to deal with the implementation of the scheme?

THE MINISTER OF MICRO, SMALL AND MEDIUM ENTERPRISES (SHRI MAHAVIR PRASAD): (a) As on 30th November 2008, cumulatively 1,22,888 proposals have been approved for guarantee cover for a total sanctioned loan amount of Rs.3717.51 crore under Credit Guarantee Fund Scheme. As per assessment made from information provided by the Member Lending Institutions (MLIs), the expected turnover of guaranteed units is Rs. 30,108.04 crore with an expected employment generation of 13.24 lakh persons.

(b) and (c) Credit Guarantee Fund Trust for Micro and Small Enterprises (CGTMSE) provides guarantee cover in respect of the credit facility extended by MLIs up to Rs. 50 lakh per borrower only if the credit facility is extended by MLI without any collateral security and/or third party guarantee.